P0200118698

(Ré	equestor's Name)
(Ad	ddress)
(Ad	ldress)
(Cit	ty/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(Bu	usiness Entity Name)
(Do	ocument Number)
Certified Copies	_ Certificates of Status
Special Instructions to	Filing Officer:
_	
<u> </u>	





600079948526

09/25/06--01056--005 **35.00

SECRETARY OF STATE

P3 9/26/030 MMD

COVER LETTER

TO: Amendme Division of	ent Section of Corporations	
SUBJECT:	Southeast Utilities Group	o, Inc.
SCHOLCT	(Name of C	orporation)
DOCUMENT N	UMBER: P02000118698	
The enclosed State	ement of Change of Registered Office	e/Agent and fee are submitted for filing.
Please return all c	orrespondence concerning this matter	r to the following:
	Robert Lederman	
	(Name of Con	ntact Person)
	(Firm/Co	ompany)
	1570 Madruga Avenue, Si	
	(Add	ress)
	Coral Gables, Florida	33146
-	(City/State ar	nd Zip Code)
For further inform	ation concerning this matter, please of	call:
Rc (N	obert Lederman ame of Contact Person)	at (305) 666-2288 (Area Code & Daytime Telephone Number)
Enclosed is a \$35.	00 check made payable to the Depart	ment of State.
	Mailing Address: Amendment Section	Street Address: Amendment Section
	Division of Corporations	Division of Corporations
	P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circle
	I dildidolog I L ULUIT	Tallahassee FL 32301

Ŧ

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of char	rovisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this age is submitted for a corporation organized under the laws of the State of <u>Florida</u> to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the	ne corporation: Southeast Utilities Group, Inc.
	office address: 12711 S.W. 188th Street
	Miami, FL 33177
3. The mailing ac	ldress (if different):
4. Date of incorp	oration/qualification: 11/05/02 Document number: P02000118698
5. The name and Florida Depart	street address of the current registered agent and registered office on file with the ment of State:
	Deric Rivera
	12711 S.W. 188th Street
	Miami, FL 33177
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered office
	Robert Lederman FS 2
	1570 Madruga Avenue, Suite 311
	(P.O. Box NOT acceptable)
	Coral Gables, FL 33146
The street address as changed will	ss of its registered office and the street address of the business office of its registered agent, be identical.
Such change wa authorized by th	s authorized by resolution duly adopted by its board of directors or by an officer so e board, or the corporation has been notified in writing of the change.
	Deric Rivera
` -	the appointment as registered agent and agree to act in this canacity
I further agree to of my duties, and document is being corporation has	the appointment as registered agent and agree to act in this capacity. The comply with the provisions of all statutes relative to the proper and complete performance of the proper and complete performance of the familiar with and accept the obligation of my position as registered agent. Or, if this are filed merely to reflect a change in the registered office address, I hereby confirm that the performance of this change.
	September 1, 2006
If signing on bel	nature of Registered Agent) (Date) nalf of an entity:
	yped or Printed Name)
γ.	(F)

* * * FILING FEE: \$35.00 * * *